

PATENT**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Application No.: 10/730,521 Confirmation No. 2985
Applicant: FROST, et al.
Filed: December 8, 2003
TC/A.U.: 3712
Examiner: MENDIRATTA, Vishu K.

Docket No.: 6600-0012-2
Customer No.: 39207

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REQUEST FOR EXTENSION OF TIME

Transmission via Facsimile 703-872-9306
Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
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Sir:

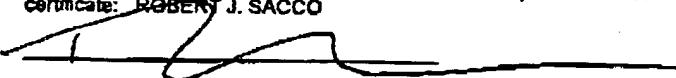
The Applicant herewith petitions the Commissioner of Patents and Trademarks to extend the time for reply to the Office Action dated May 5, 2004, for three (3) months from August 5, 2004 to November 5, 2004. Please charge our deposit account no. 50-2884, in the amount of \$490 to cover the cost of the extension. Any deficiency or overpayment should be charged or credited to Deposit Account No. 50-2884.

Respectfully submitted,

11-4-04
Date


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11/08/2004 HASSEY 00000001 502884 10730521
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I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office, Fax No. (703) 872-9306 on 11-4-04. Typed or printed name of person signing this certificate: ROBERT J. SACCO


(00003548:)

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10/730521

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS	<u>8</u>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	8 minus 20= *	<u>0</u>
INDEPENDENT CLAIMS	2 minus 3 = *	<u>0</u>
MULTIPLE DEPENDENT CLAIM PRESENT	<input type="checkbox"/>	

SMALL ENTITY
TYPE OR OTHER THAN
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
XS 9=	<u>—</u>	OR XS18=	
X43=	<u>—</u>	OR X86=	
+145=	<u>—</u>	OR +290=	
TOTAL	<u>385</u>	OR TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	**	=	
Total	*	<u>12</u>	Minus	<u>20</u>	= <u>—</u>
Independent	*	<u>2</u>	Minus	<u>3</u>	= <u>—</u>
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>				

SMALL ENTITY OR OTHER THAN
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	**	=	
Total	*	Minus	**	=	
Independent	*	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	**	=	
Total	*	Minus	**	=	
Independent	*	Minus	***	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM	<input type="checkbox"/>				

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.